

Part C State Annual Performance Report (APR) for _2005_**Overview of the Annual Performance Report Development:**

Improvement Activities were addressed through NDICC videoconference meetings accessible from sites in all regions. Statewide Early intervention leaderships and selected staff meet monthly through videoconference meetings to discuss Improvement Activities. Data from the ASSIST (database shared by service coordinators and Infant Development primary coaches for the development and management of IFSPs and data documentation) was shared with regional Early Intervention Administrators quarterly. Quarterly Conference Calls were also held with regional early intervention staff to review monitoring results from the Technical Assistance Project. Training regarding the new monitoring protocol, Case Review Tool and Regional Early Intervention Reports was presented three times and the attendance of all early intervention staff financially support.

All data reported for APR Indicators 1, 7, 8 and 9 was gathered through monitoring of all Early Intervention programs. The method used to select cases to review is described in the Monitoring Protocol document.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100 % of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 2 weeks of the start date indicated on their signed IFSP

Actual Target Data for FFY 2005:

16 infants and toddlers received all of the early intervention services listed on their IFSP on or before the start date listed on the IFSP compared to the 27 infants and toddlers who's IFSP was reviewed times 100 = 59.26%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2005:

During 2004/2005, the way North Dakota measured timely delivery of services changed. The standard is now on or by the start date listed on the IFSP. But that change in practice did not occur until midway through the year and IFSP with projected start dates based on the 'old' way are now be monitored under the new standards. (Teams recorded the beginning of the 12-month period as the start date for trans-disciplinary consultation with a frequency of quarterly even though the actual first consultation may not have been anticipated until 3 months later.)

Timely is now defined as early intervention services beginning on or before start date within IFSP. The number of infants or toddlers who received all the services on their IFSP in a timely manner will be compared to the number of infants and toddlers with in services on their IFSP.

Data for this indicator will not be based on cases sampled during local or state level case reviews. Service Coordinators will collect this data every six months for all children on their caseload.

Improvement Activity number 1 (Transition 3 remaining Infant Development Programs out of Regional Human Service Centers, so additional Infant Development staff can be added to address the increasing number of infants and toddlers receiving supports. Obtain an average program ratio of 1 to 11.) was accomplished.

Improvement Activity number 2 (Utilize FTEs vacated by Infant Development staff to increase number of Service Coordinators, resulting in an average ratio of 1 to 45 for Service Coordinators working with infants and toddlers.) was addressed by making FTEs and funding available to regional Service Coordination agencies. Not all agencies have filled the positions.

Improvement Activity number 4(Issue policy defining timely delivery of waiver funded early intervention services, continued frequency and documentation of need for non-waiver funded early intervention services) will be accomplished through procedures built into revised Improvement Activity number 3.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2005

Revise Improvement Activity number 3 with a new timeline of July 1, 2007 to address the development of a mechanism within ASSIST to identify services to are being initiated and not continued from a previous plan period. Changes will also be designed into the Quality Enhancement Review document completed by the Service Coordinator every 6 months, to capture data regarding the start date for all new services that began during the last 6 months.

Part C State Annual Performance Report (APR) for 2005 (Insert FFY)

Overview of the Annual Performance Report Development:

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.¹

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	96.3% of infants and toddlers with IFSPs will primarily receive early intervention services in their home or programs for typically developing children.

Actual Target Data for 2005 (2005-2006):

618 data from December 1, 2005 indicated that 679 infants and toddlers with IFSPs received early intervention services in the home or programs for typically developing children divided by 691 infants and toddlers with IFSPs times 100 = **98.26 Percent**

Children, birth to 1 year of age, have the lowest percent at 97.6%. Children, 1 to 2 years of age, had the highest percent of supports in their home or a setting with peers. 98.43 percent received support in their home or a setting with peers. Only 12 infants and toddlers statewide did not receive the majority of the early intervention services in their family home or another community setting for similar age peers. Although the primary early intervention coach works with the family to support the child in natural learning opportunities through out the day, only the time that the primary coach is consulting with the family is compared to other early intervention services such as direct therapy.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (Insert FFY):

Improvement Activity number 1 (Continue technical assistance and training for Infant Development staff and Service Coordinators regarding implementation of routines based intervention and transdisciplinary coaching model.) continues to be implemented. Improvement Activity number 2 (In-depth analysis of December 1, 2005 618 data, to determine factors effecting situations in which infants and toddlers did not receive early intervention services in their home or programs for typically developing children and development of recommendations to increase the number of children supported in natural learning environments.) completed.

¹ At the time of the release of this package, revised forms for collection of 618 State reported data had not yet been approved. Indicators will be revised as needed to align with language in the 2005-2006 State reported data collections.

North Dakota Early Intervention supports are individualized and look different for every family. Of the 700 Infants and Toddlers receiving Infant Development services on June 30, 2006; 178 (25%) received consultation services from an Occupational Therapist, 131 (19%) received consultation services from a Physical Therapist, and 285 (41%) received consultation services from a Speech Language Pathologist. In addition to consultation support, 80 (11%) children received direct Occupational Therapy, 77 (11%) received direct Physical Therapy, and 89 (13%) received direct Speech Language Therapy. When consultation and direct therapy are combined, 37% of the IFSPs included Occupational Therapy, 30% Physical Therapy and 53% Speech Language Therapy.

The amount and frequency of support families receive from their Infant Development Primary Coach also varies. 8% of the primary caregivers received a visit once a month, 15% received a visit every other week, 78% received a weekly visit, and 1% received 2 or 3 visits per week. The location and time of the visits also varied based on the family's preference. Some occurred during the day in the family home, some during the early evening or on Saturday, some in childcare setting, at other family members homes, or community sites such as libraries, playgrounds, stores, restaurants, etc.

Some children eligible for early intervention supports may receive service coordination only. Those situations usually involve infants that have not yet been discharged from the hospital, children that are institutionalized due to their intense medical needs that cannot be met in a family home, or families that have chosen to receive direct therapy only. On June 30, 2006, 21 families were receiving Service Coordination without Infant Development Primary Coaching support.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *(Insert FFY)*

Based on information gathered through Improvement Activity number 2 and current service delivery frequency and location data, it appears that the number of children receiving direct therapy in a clinic setting is increasing. A new Improvement Activity will be added to increase involvement of clinic based therapists and those in private practice in training activities regarding the benefits of intervention in the child's natural environment. Staff from the State Medicaid agency will also be involved in examination of requests for additional Medicaid State Plan authorized therapy sessions above the established base amount.

Part C State Annual Performance Report (APR) for _____ (Insert FFY)**Overview of the Annual Performance Report Development:**

See SPP for baseline data collected July, August and September 2006.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

A. Positive social-emotional skills (including social relationships):

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{(\# of infants and toddlers who did not improve functioning)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{(\# of infants and toddlers who did not improve functioning)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right]$ times 100.

- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$

If a + b + c + d + e does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{(\# of infants and toddlers who did not improve functioning)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{(\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers)}}{\text{(\# of infants and toddlers with IFSPs assessed)}} \right] \text{ times } 100.$

If a + b + c + d + e does not sum to 100%, explain the difference.

FFY	Measurable and Rigorous Target
(Insert FFY)	(Insert Measurable and Rigorous Target.)

Actual Target Data for (Insert FFY):

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (Insert FFY):

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines /
Resources for** *(Insert FFY)*
[If applicable]

Part C State Annual Performance Report (APR) for _____ (Insert FFY)**Overview of the Annual Performance Report Development:**

See SPP for Baseline Data, Targets and Improvement Activities.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
<i>(Insert FFY)</i>	<i>(Insert Measurable and Rigorous Target.)</i>

Actual Target Data for *(Insert FFY):*

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *(Insert FFY):*

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *(Insert FFY)*
[If applicable]

Part C State Annual Performance Report (APR) for 2005**Overview of the Annual Performance Report Development:****Monitoring Priority: Effective General Supervision Part C / Child Find****Indicator 5:** Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	1.75 percent of the total population of infants and toddlers birth to 1 residing in North Dakota will be identified and found eligible for early intervention services and have an IFSP

Actual Target Data for 2005 (2005-2006):

618 data indicated that on December 1, 2005, the North Dakota early intervention system was serving 125 infants and toddlers birth to 1. The total population of North Dakota infants and toddlers birth to 1 was 7,922. **1.58** percent of the total population under 1 was served (Table 8-4).

Compared to other states with narrow eligibility criteria (excluding infants at risk) North Dakota ranks 2nd in the percent of infants and toddlers served, birth to 1.

Compared to all states (excluding infants at risk) North Dakota ties at 9th in the percent of infants and toddlers served, birth to 1.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005 (2005-2006):

Although the percentage of infants less than one year of age served in early intervention decreased from 1.72% in December 2004 to 1.58% in December 2005, the actual difference in the number of children was only 4. It appears that the major impact on the percentage served was the change in the estimated population less than one from 7,488 to 7,922. Current 618 data being submitted indicates that the number of infants served has increased.

Improvement Activity number 1 (Modify Right Track Database for facilitate more consistent use and easy of report generation to better track screening tools used and needs of children receiving Right Track services.) was not completed as the state was waiting to finalize the Child Outcome Measurement tool to then determine if there was any benefit in incorporating the tool into the Right Track Database to gather information regarding at risk infants and toddlers.

Improvement Activity number 2 was completed. (Develop MOU with First Sounds and Project Kaylyn to utilize Right Track screeners to follow-up with families who have an infant that failed the first newborn hearing screening at the hospital and assist the family in receiving the second screening.)

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005 (2005-2006):

Timeline for Improvement Activity number 1 will be extended to 07-01-2008. This will allow for examination of benefits of using similar progress measurement tool across at risk children being tracked as a childfind activity and eligible children.

Part C State Annual Performance Report (APR) for 2005 (2005-2006):**Overview of the Annual Performance Report Development:****Monitoring Priority: Effective General Supervision Part C / Child Find****Indicator 6:** Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	2.89 percent of the total population of infants and toddlers birth to 3 residing in North Dakota will be identified and found eligible for early intervention services and have an IFSP

Actual Target Data for 2005 (2005-2006):

618 data indicated that on December 1, 2005, the North Dakota early intervention system was serving 691 infants and toddlers birth to 3. The total population of North Dakota infants and toddlers birth to 3 was 22,875. **3.02** percent of the total population under 3 was served.

Compared to other states with narrow eligibility criteria (excluding infants at risk) North Dakota ranks 2nd in the percent of infants and toddlers served, birth to 3. When compared to all states, North Dakota ranks 11th in the nation.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005 (2005-2006):

The number of children served increase by 80 and the total population estimated changed from 21,842 to 22,875. Current data indicates that the percentage of infants and toddlers served continues to increase. There has been not change in the eligibility criteria.

Improvement Activity number 1 (Modify Right Track Database for facilitate more consistent use and easy of report generation to better track screening tools used and needs of children receiving Right Track services.) was not completed as the state was waiting to finalize the Child Outcome Measurement tool to then determine if there was any benefit in incorporating the tool into the Right Track Database to gather information regarding at risk infants and toddlers.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005 *(2005-2006)*:

Improvement Activity number 1 (Modify Right Track Database for facilitate more consistent use and easy of report generation to better track screening tools used and needs of children receiving Right Track services.) was not completed as the state was waiting to finalize the Child Outcome Measurement tool to then determine if there was any benefit in incorporating the tool into the Right Track Database to gather information regarding at risk infants and toddlers.

Part C State Annual Performance Report (APR) for 2005 (2005-2006):**Overview of the Annual Performance Report Development: See Indicator # 1****Monitoring Priority: Effective General Supervision Part C / Child Find**

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100 percent of eligible infants and toddlers will have evaluations, assessments and an initial IFSP meeting conducted within 45 days of referral.

Actual Target Data for 2005 (2005-2006):

27.57 Percent = [(9 eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (33 eligible infants and toddlers evaluated and assessed)] times 100

When accounting for IFSP that were past 45 days but the delay was due to family reasons:

39.39 Percent = [(13 eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (33 eligible infants and toddlers evaluated and assessed)] times 100

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that
System issues that prevented correction of the non-compliance regarding IFSP within 45 days of referral, involved lack of a process to allow early intervention staff to be trained and supervised by and audiologist to conduct OAE's hearing screenings. Since the end of the 2005 reporting period progress has been made with the North Dakota Academy of Audiologists and contracts finalized, equipment purchased and training designed and delivered within the next 4 months.

Programs made progress by having all IFSP within 45 days of referral or it was due to family reasons. Programs also conduct all evaluations with multidisciplinary teams with one exception and that situation has since been corrected. The reason there is not compliance in all programs across the state in this area is due to hearing screenings and that is being resolved.

Improvement Activity number 1 (Continue technical assistance and training regarding family assessments, evaluations, assessments and IFSP development to assist staff in completing high quality products in a timely manner.) completed.

Improvement Activity number 2 (Develop data collection process to more easily gather and analyze reasons why 45-day timeline may not be met.) completed. See monitoring system changes described in Indicator 9.

Improvement Activity number 5 (Experienced Parents are parents of a child currently or formally in early intervention that are hired by local early intervention programs. Expand usage of Experienced Parents and train them to provide information to new families regarding their rights, the IFSP process and the importance of routine learning opportunities; and how to answer system questions the family may feel more comfortable asking another parent.) completed. An experienced parent is now available in all areas of the state.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005 (2005-2006):

An Improvement Activity with a timeline of July 1, 2007 will be added to address the hearing screening issue.

Part C State Annual Performance Report (APR) for 2005 (2005-2006)

Overview of the Annual Performance Report Development: In addition to Indicator # 1 comments a task force of families, early intervention and preschool staff and consultants from NECTC and Mountain Plains Regional Resource Center, developed and designed training regarding Joint Part C/619 Transition Guidelines. The document was designed to also be a workbook for families so they can more fully participate in the transition process. The IDEA Advisory Committee for Part B and the NDICC oversaw the development of the new guidelines.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
2005 (2005-2006):	<p>A. 100 percent of children exiting Part C will have an IFSP with transition steps and services.</p> <p>B. The appropriate LEA will be notified for 100 percent of the children exiting Part C who are potentially eligible for Part B.</p> <p>C. 100 percent of children exiting Part C and potentially eligible for Part B will have a transition conference 90 days before their 3rd birthday</p>

Actual Target Data for 2005:

A. 20 of the sampled children exiting Part C had an IFSP with transition steps and services included in their IFSP. 20 children exiting Part C were sampled. 100 percent had an IFSP with transition steps and services.

B. LEAs were notified for 20 of the sampled children who were exiting Part C and were potentially eligible for Part B. 21 children exiting Part C and potentially eligible for Part B were sampled. LEAs were notified for 95.52 percent of the sampled children who were exiting Part C and were potentially eligible for Part B.

C. 15 of the sampled children exiting Part C and potentially eligible for Part B had a transition conference 90 days before their third birthday. 18 children exiting Part C and potentially eligible for Part B were sampled. 83.33 percent of the sample children exiting Part C and potentially eligible for Part B had a transition conference 90 days before their third birthday.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005 (2005):

Indicator 8-A improved from 97% to 100%, Indicator 8-B slipped from 100 % to 95.52%. In only one situation sampled was there no documentation that the LEA was notified. The situation involved a child not referred to early intervention until almost transition age and the family did not want LEA involvement. Staff received training regarding new Transition Guidelines that highlighted that they must notify LEA of potential children even if the family does not sign a release. Indicator 8-C also slipped from 87% to 83.33 %. Data will be split into 6 month periods for 2006 APR to examine the impact the Joint Part C/619 Transition Guidelines and training had on Indicator 8 compliance. Regions not in compliance will be required to develop a Regional Quality Improvement Plan with Improvement Activities to address their areas of non-compliance and assure compliance.

A Joint Prior Notice was developed for use statewide to facilitate Part C and 619 involvement and ownership in the transition process.

Improvement Activity number 1 (Finalize Joint Transition Guidelines) was completed.

Improvement Activity number 2 (Finalize Joint Transition Guidelines) was completed.

Improvement Activity number 3 (Train Infant Development staff, Service Coordinators and Regional Experienced Parents regarding Transition Guidelines) was completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 2005 (2005-2006): [If applicable]

Part C State Annual Performance Report (APR) for 2005 (2005-2006):

Overview of the Annual Performance Report Development: See Indicator # 1

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100 percent of all findings of non-compliance will be corrected as soon as possible but in no case later than 1 year from identification.

Actual Target Data for 2005:

Data from FFY 2004 contained limited quantitative information, as the majority of the monitoring reports contained qualitative information. 21 findings of non-compliance were identified in 2004. 8 for untimely delivery of EI services, 8 for IFSPs within 45 days of referral, 1 for lack of Transition Plan and 4 for not holding Transition meetings by the time the child was 2 years 9 months of age.

Programs were sited for issues of non-compliance, not number of cases with specific non-compliance issues. The cases were pulled from the April, May, June quarter and reports created and shared with the programs at the beginning of the following quarter. (Programs were not notified of non-compliance regarding cases sampled July 1, 2005 until October 1, 2005.) Of the 21 findings of non-compliance identified 10-01-2005, 6 were corrected by July 1, 2006.

$$6 \text{ findings corrected} / 21 \text{ findings of non-compliance identified in 2004} \times 100 = 28.57\%$$

During 2004/2005, the way North Dakota measured timely delivery of services changed. The standard is now on or by the start date listed on the IFSP. But that change in practice did not occur until midway through the year and IFSP with projected start dates based on the 'old' way are now be monitored under the new standards. (Teams recorded the beginning of the 12 month period as the

start date for trans-disciplinary consultation with a frequency of quarterly even though the actual first consultation may not have been anticipated until 3 months later.)

Other system issues that prevented correction of the non-compliance regarding IFSP within 45 days of referral, involved lack of a process to allow early intervention staff to be trained and supervised by and audiologist to conduct OAE's hearing screenings. Since the end of the 2005 reporting period progress has been made with the North Dakota Academy of Audiologists and contracts finalized, equipment purchased and training designed and delivered within the next 4 months. Programs made progress by having all IFSP within 45 days of referral or it was due to family reasons. Programs also conduct all evaluations with multidisciplinary teams with one exception and that situation has since been corrected. The reason there is not compliance in all programs across the state in this area is due to hearing screenings and that is being resolved.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (2005):

**Because of the qualitative nature of the majority of the monitoring reports from 2004, the data submitted in the SPP cannot be future refined.*

Improvement Activity number 1 (Formalize quarterly data collection process for Part C Compliance Checklist.) was completed. See Monitoring Protocol and Case Review Item Analysis documents. The actual Case Review Tool is at: https://survey.med.nodak.edu/ome/PT/Case_Review1_04_07.asp

The North Dakota Early Intervention General Supervision system was modified to incorporate local accountability and quantitative data collection. See Monitoring Protocol and Case Review Item Analysis documents. The actual Case Review Tool is located at: https://survey.med.nodak.edu/ome/PT/Case_Review1_04_07.asp

Because of those changes, more data is now available to determine if a program is in compliance and if they are not there is now a mechanism to identify the issue and a clock to start the correction time period. The local programs receive reports (Regional Early Intervention Report) every quarter. The data in the report is from the Case Review information as well as query data from the ASSIST and electronic file databases. Because all early intervention programs in North Dakota are monitored by a local and a state team every quarter, the local programs do not need to report back on status of correction. The quarterly data will determine when non-compliance has been corrected. The local programs must work with their Regional ICCs to develop a plan on how they are going to correct the non-compliance. The plan (Regional Quality Improvement Plan) will address areas of non-compliance as well as areas that need continual improvement.

The areas of non-compliance utilizing the new monitoring process were not identified until 10-01-2006, so that data is not reflected in calculation of non-compliance corrected FFY 2005. The following table tracks all issues of non-compliance and when they were identified (issues remaining from 2004 and issues identified in 2005.) The table is divided into three areas. The first sections reflects SPP Indicators 1 through 8. The second section identifies minimum compliance standards and the third sections lists areas in which progress must be made. If a region is not at 70 % or greater in the third sections or they have not improved the percentage above 70 in the last year they are out of compliance.

Based on the following table 39 findings of non-compliance are still outstanding. 16 involving Indicators in the first section, 16 minimum compliance issues in the second section, and 7 regions were below 70 % in the third section. 9 of the 39 findings are over a year old.

An analysis of the findings in the third section, indicated that the core issues involved documentation. Changes are being made to standardize more of the procedures and build them into the ASSIST and electronic file databases.

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 8	State
Indicator Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance
Indicator #1 Timely Srvs	0/1=0.00%	1/1=100%	4/5=80%	3/4=75%	4/6=66.67%	0/1=0.00%	4/3=44.44%	2/3=66.67%	16/27=59.26%
Date Noncompliance Identified	10/1/2006		10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Indicator #2 Natural Environment	33/33=100%	55/60=91.67%	55/55=100%	122/127=96.06%	123/123=100%	50/51=98%	153/153=100%	71/72=98.61%	673/691=98.26%
Date Issues Identified									
Indicator #3A Social/Emotional skills at or above	2/3=66.67%	7/18=38.89%	5/12=41.67%	10/23=43.48%	16/31=51.61%	11/15=73.33%	14/23=60.87%	16/21=76.19%	81/146=55.48%
Indicator #3B Acquisition and use of new skills at or above	1/3=33.33%	6/18=33.33%	4/12=33.33%	5/23=21.74%	5/31=16.13%	5/15=33.33%	10/23=43.48%	15/21=71.43%	51/146=34.93%
Indicator #3C Appropriate behaviors at or above	0/3=0.00%	5/18=27.78%	5/12=41.67%	6/23=26.09%	6/31=19.35%	5/15=33.33%	5/23=21.74%	15/21=71.43%	47/146=32.19%
Date Issues Identified									
Indicator #4A Family knows their rights	4/6=66.67%	16/26=61.54%	11/14=78.57%	31/35=88.57%	25/33=75.76%	14/16=87.50%	54/53=91.53%	25/26=96.15%	180/215=83.72%
Indicator #4B Family can communicate child's needs	4/6=66.67%	16/26=61.54%	13/14=92.86%	30/35=85.71%	28/33=84.85%	14/16=87.50%	58/53=98.31%	25/26=96.15%	188/215=87.44%
Indicator #4C Family can help child develop & learn	4/6=66.67%	19/26=73.08%	12/14=85.71%	30/35=85.71%	27/33=81.82%	13/16=81.25%	54/53=91.53%	24/26=92.31%	163/215=75.81%
Date Issues Identified									
Indicator #5 % < 1	10/296=3.38%	11/1160=0.95%	12/558=2.15%	28/1082=2.59%	27/2074=1.30%	10/535=1.88%	20/1505=1.33%	7/390=1.79%	125/7,322=1.58%
Date Issues Identified									
Indicator #6 % < 3	33/920=3.59%	65/3,464=1.88%	54/1,807=2.99%	132/3,313=3.98%	123/6,237=1.97%	52/1,811=2.87%	159/4,607=3.45%	73/1,138=6.42%	691/22,875=3.02%
Date Issues Identified									
Indicator #7 45 days	1/1=100%	3/6=50%	4/7=57.14%	2/2=100%	3/4=75%	4/4=100%	2/3=66.67%	6/6=100%	25/33=75.76%
Indicator #7 Multidisciplinary	1/1=100%	3/3=100%	4/4=100%	2/2=100%	3/3=100%	3/4=75%	2/2=100%	6/6=100%	24/25=96%
Indicator #7 All Domains	1/1=100%	0/3=0.00%	0/4=0.00%	1/2=50%	0/3=0.00%	2/3=66.67%	2/2=100%	0/6=0.00%	9/24=37.50%
Indicator #7 45 days (accounting for family reasons)	1/1=100%	6/6=100%	7/7=100%	2/2=100%	4/4=100%	4/4=100%	3/3=100%	6/6=100%	33/33=100%
Indicator #7 Multidisciplinary	1/1=100%	6/6=100%	7/7=100%	2/2=100%	4/4=100%	3/4=75%	3/3=100%	6/6=100%	32/33=96.97%
Indicator #7 All Domains	1/1=100%	3/6=50%	0/7=0.00%	1/2=50%	1/4=25%	3/3=100%	3/3=100%	0/6=0.00%	13/32=40.62%
Date Noncompliance Identified		10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005		10/1/2005	10/1/2005
Indicator #8A Transition Plan	1/1=100%	3/3=100%	4/4=100%	2/2=100%	1/1=100%	2/2=100%	1/1=100%	6/6=100%	20/20=100%
Indicator #8B LEA Notified	1/1=100%	3/3=100%	3/4=75%	2/2=100%	1/1=100%	3/3=100%	1/1=100%	6/6=100%	20/21=95.24%
Indicator #8C 2 yr-3 month Mtg	NA	0/2=0%	4/4=100%	2/2=100%	1/1=100%	2/2=100%	0/1=0%	6/6=100%	15/18=83.33%
Date Noncompliance Identified		10/1/2005	10/1/2005			10/1/2005	10/1/2005		10/1/2005

	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 8	State
Case Review Compliance Items	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance	% in Compliance
IF SP Effective Date (Case Review Item # 5)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Functional & Measurable (Case Review Item # 25)	3/4=75%	1/10=10%	3/4=75%	2/7=28.57%	5/8=62.50%	1/3=33.33%	2/4=50%	8/10=80%	29/61=47.54%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Location of Services (Case Review Item # 32)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Individual or Group (Case Review Item # 33)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Delivery Method (Case Review Item # 34)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Funding Source (Case Review Item # 35)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Service Duration (Case Review Item # 36)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Parent's Rights Documented (Case Review Item # 38)	4/4=100%	10/10=100%	9/9=100%	7/7=100%	8/8=100%	9/9=100%	4/4=100%	10/10=100%	61/61=100%
Date Noncompliance Identified									
Rationale (Case Review Item # 41)	3/4=75%	7/10=70%	3/4=75%	5/8=62.50%	5/8=62.50%	1/8=12.50%	2/2=100%	6/10=60%	36/57=63.16%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006

Case Review Progress Items	Region 1 % of Progress	Region 2 % of Progress	Region 3 % of Progress	Region 4 % of Progress	Region 5 % of Progress	Region 6 % of Progress	Region 7 % of Progress	Region 8 % of Progress	State % of Progress
Present Level of Performance (Case Review Item # 1)	2/4=50%	0/10=0%	0/9=0%	0/7=0%	3/8=37.50%	1/9=11.11%	0/4=0%	2/10=20%	8/61=13.11%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Child's Interest (Case Review Item # 2)	3/4=75%	1/10=10%	1/9=11.11%	1/7=14.29%	3/8=37.50%	1/9=11.11%	1/4=25%	10/10=100%	21/61=34.43%
Date Noncompliance Identified		10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
IFSP Date (Case Review Item # 4)	4/4=100%	3/10=30%	3/9=30%	7/7=100%	8/8=100%	5/9=55.56%	3/4=75%	3/10=30%	54/61=88.52%
Date Noncompliance Identified						10/1/2006			
Minimum Participants Documented (Case Review Item # 6)	0/4=0%	0/10=0%	0/9=0%	1/7=14.29%	4/8=50%	1/9=11.11%	1/4=25%	7/10=70%	14/61=22.95%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Review of Pertinent Records (Case Review Item # 8)	3/4=75%	6/10=60%	8/9=88.89%	5/7=71.43%	6/8=75%	5/9=55.56%	3/4=75%	10/10=100%	46/61=75.41%
Date Noncompliance Identified		10/1/2006				10/1/2006			
PLP Based on Objective Criteria (Case Review Item # 9)	3/4=75%	3/10=30%	8/9=88.89%	2/7=28%	4/8=50%	1/9=11.11%	2/4=50%	10/10=100%	33/61=54.10%
Date Noncompliance Identified		10/1/2006		10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Early Literature (Case Review Item # 18)	3/4=75%	3/10=30%	8/9=88.89%	1/7=14.29%	6/8=75%	3/9=33.33%	1/4=25%	10/10=100%	35/61=57.38%
Date Noncompliance Identified		10/1/2006		10/1/2006		10/1/2006	10/1/2006		10/1/2006
IFSP Included People Important to Family (Case Review Item # 19)	1/4=25%	0/10=0%	3/9=33.33%	2/7=28.57%	5/8=62.50%	2/9=22.22%	0/4=0%	10/10=100%	23/61=37.70%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Priorities Linked to Concerns, Strengths & Interests (Case Review Item # 20)	1/4=25%	0/10=0%	4/9=44.44%	1/7=14.29%	4/8=50%	0/9=0%	0/4=0%	0/10=0%	10/61=16.39%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Included Family Interview (Case Review Item # 21)	3/4=75%	1/10=10%	8/9=88.89%	2/7=28.57%	5/8=62.50%	3/9=33.33%	2/4=50%	10/10=100%	34/61=55.74%
Date Noncompliance Identified		10/1/2006		10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Priorities Ranked (Case Review Item # 22)	0/4=0%	0/10=0%	0/9=0%	0/7=0%	1/8=12.50%	0/9=0%	0/4=0%	0/10=0%	1/61=1.64%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Services and Supports Identified (Case Review Item # 23)	2/4=50%	3/10=30%	7/8=87.50%	5/7=71.43%	7/8=87.5%	5/9=55.56%	3/4=75%	10/10=100%	42/60=70%
Date Noncompliance Identified	10/1/2006	10/1/2006				10/1/2006			
Reflect Family Priorities (Case Review Item # 24)	1/4=25%	0/10=0%	6/9=66.67%	2/7=28.57%	5/8=62.50%	0/9=0%	3/4=75%	6/10=60%	23/61=37.70%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Developmentally Appropriate (Case Review Item # 26)	3/4=75%	1/10=10%	8/9=88.89%	2/7=28.57%	5/8=62.50%	2/9=22.22%	4/4=100%	10/10=100%	35/61=57.38%
Date Noncompliance Identified		10/1/2006		10/1/2006	10/1/2006	10/1/2006			10/1/2006
Includes pre-literacy and language (Case Review Item # 27)	2/4=50%	2/10=20%	6/9=66.67%	2/7=28.57%	6/8=75%	3/9=33.33%	1/4=25%	3/10=30%	31/61=50.82%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006	10/1/2006		10/1/2006
Includes Routine Based Activities (Case Review Item # 28)	1/4=25%	1/10=10%	2/9=22.22%	3/7=42.86%	6/8=75%	1/9=11.11%	2/4=50%	10/10=100%	26/61=42.62%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006	10/1/2006		10/1/2006
Includes Use of Lay Language (Case Review Item # 29)	1/4=25%	1/10=10%	1/9=11.11%	5/7=71.43%	4/8=50%	1/9=11.11%	2/4=50%	10/10=100%	25/61=40.98%
Date Noncompliance Identified	10/1/2006	10/1/2006		10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Measurable Functional Activities (Case Review Item # 30)	4/4=100%	1/10=10%	5/9=55.56%	3/7=42.86%	4/8=50%	1/9=11.11%	0/4=0%	10/10=100%	28/61=45.90%
Date Noncompliance Identified		10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Frequency/Intensity Linked to Outcomes (Case Review Item # 31)	0/1=0%	0/10=0%	5/9=55.56%	3/7=42.86%	3/8=37.50%	2/9=22.22%	1/4=25%	6/10=60%	20/58=34.48%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
Consultations Documented (Case Review Item # 37)	1/4=25%	2/9=22.22%	5/9=55.56%	4/7=57.14%	3/8=37.50%	0/9=0%	3/4=75%	6/10=60%	24/60=40%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006	10/1/2006
AT Services (Case Review Item # 39)	2/2=100%	1/3=33.33%	2/2=100%	0/3=0%	0/0=0%	0/5=0%	0/1=0%	1/1=100%	6.17=35.29%
Date Noncompliance Identified		10/1/2006		10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
AT Devices (Case Review Item # 40)	2/2=100%	1/3=33.33%	3/3=100%	0/3=0%	0/0=0%	2/6=33.33%	0/1=0%	1/1=100%	9/19=47.37%
Date Noncompliance Identified		10/1/2006		10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Trans/Discuss appropriate services (Case Review Item # 44)	1/2=50%	0/10=0%	2/4=50%	0/2=0%	2/2=100%	0/4=0%	1/2=50%	6/6=100%	12/26=46.15%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006	10/1/2006		10/1/2006
Trans/Review child's program options (Case Review Item # 45)	1/2=50%	1/4=25%	2/4=50%	0/2=0%	3/3=100%	0/4=0%	1/2=50%	5/6=83.33%	13/27=48.15%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006	10/1/2006		10/1/2006
Trans/Established Transition Plan (Case Review Item # 46)	0/1=0%	0/10=0%	2/4=50%	0/2=0%	1/2=50%	0/4=0%	1/2=50%	5/6=83.33%	3/25=12%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Trans/Steps taken to support child (Case Review Item # 47)	0/1=0%	0/3=0%	1/4=25%	1/2=50%	1/2=50%	0/4=0%	1/2=50%	5/6=83.33%	9/24=37.50%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Trans/Procedures to prepare child for new setting (Case Review Item # 48)	0/1=0%	0/3=0%	0/4=0%	0/2=0%	1/2=50%	0/4=0%	0/1=0%	5/6=83.33%	6/23=26.09%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Trans/Discussions with parents re: future placement options (Case Review Item # 49)	0/1=0%	0/3=0%	0/4=0%	0/2=0%	0/1=0%	0/4=0%	0/1=0%	5/6=83.33%	5/22=22.73%
Date Noncompliance Identified	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006		10/1/2006
Cumulative Progress Items %	44/89=49.44%	37/226=16.37%	106/208=50.96%	52/75=69.33%	100/172=58.14%	53/215=24.65%	56/92=60.87%	188/238=78.99%	602/1398=43.06%
Difference from Minimum Initial Target of 70%	-20.56%	-53.63%	-19.04%	-37.09%	-11.86%	-51.86%	-30.87%	+8.99%	-26.94%

Improvement Activity number 2 (Modify data management support contract depending on GSEG proposal results) was completed. Data Project personnel have been involved in training activities for local programs and data packaging for regional and state early intervention staff.

Improvement Activity number 3 (Develop contract for Parent Liaison support) was not completed as a contractor could not be located. A potential contractor has been found and a contract has been drafted. To provide additional support for SPP/APR activities a portion of an administrative support position has been to the Part C program at the state level.

Improvement Activity number 4 (Monitor need for expansion of Technical Assistance and Training contract.) was addressed and contract expanded to include quantitative monitoring.

Improvement Activity number 5 (Transition 3 remaining Infant Development Programs out of Regional Human Service Centers, so additional Infant Development staff can be added to address the increasing number of infants and toddlers receiving supports. Obtain an average program ratio of 1 to 11.) was accomplished.

Improvement Activity number 6 (Utilize FTEs vacated by Infant Development staff to increase number of Service Coordinators, resulting in an average ratio of 1 to 45 for Service Coordinators working with infants and toddlers.) was addressed by making FTEs and funding available to regional Service Coordination agencies. Not all agencies have filled the positions.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (2005)

An Improvement Activity with a timeline of October 1, 2007 will be added to address the need for more standardized procedures.

Part C State Annual Performance Report (APR) for _2005_ (Insert FFY)**Overview of the Annual Performance Report Development:** See Indicator # 1**Monitoring Priority: Effective General Supervision Part C / General Supervision****Indicator 10:** Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2005	100 percent of signed written complaints with reports issued were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Actual Target Data for 2005: No signed written complaints were received from 07-01-2005 through 06-30-2006. See completed Dispute Resolutions Table 4.**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005:** Improvement Activity number 1 (Prepare and Provide information at Family Connections Conference regarding issue resolution options.) was completed and will become an ongoing activity.

Parents Rights brochure has been revised based on recommendation received following Part C Verification Visit. Proposed changes are being reviewed by ND Department of Human Services Legal Advisory Unit. See draft Parent Rights document.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (2005)*[If applicable]*

Part C State Annual Performance Report (APR) for __2005__ (Insert FFY)

Overview of the Annual Performance Report Development: See Indicator # 1

Monitoring Priority: Effective General Supervision Part C / General Supervision**Indicator 11:** Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

FFY	Measurable and Rigorous Target
2005	100 percent of due process hearing requests were fully adjudicated within 30 days.

Actual Target Data for 2005: No requests for a due process hearing were received from July 1, 2005 through June 30, 2006. See completed Dispute Resolutions Table 4.**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005:** Improvement Activity number 1 (Prepare and Provide information at Family Connections Conference regarding issue resolution options.) was completed and will become an ongoing activity.**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (2005)**
[If applicable]

Part C State Annual Performance Report (APR) for 2005 *(Insert FFY)***Overview of the Annual Performance Report Development:**

***Not applicable as North Dakota Part C does not utilize Part B due process procedures.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
<i>(Insert FFY)</i>	<i>(Insert Measurable and Rigorous Target.)</i>

Actual Target Data for *(Insert FFY):*

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for *(Insert FFY):*

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *(Insert FFY)*
[If applicable]

Part C State Annual Performance Report (APR) for __2005__ *(Insert FFY)*

Overview of the Annual Performance Report Development: See Indicator # 1

Monitoring Priority: Effective General Supervision Part C / General Supervision**Indicator 13:** Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
<i>(Insert FFY)</i>	<i>(Insert Measurable and Rigorous Target.)</i>

Actual Target Data for *(2005 FFY)*: No requests for mediations received from July 1, 2005 through June 30, 2006. See completed Dispute Resolutions Table 4.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2005: Improvement Activity number 1 (Prepare and Provide information at Family Connections Conference regarding issue resolution options.) was completed and will become an ongoing activity.

Parents Rights brochure has been revised based on recommendation received following Part C Verification Visit. Proposed changes are being reviewed by ND Department of Human Services Legal Advisory Unit. See draft Parent Rights document.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for *(Insert FFY)*
[If applicable]

Part C State Annual Performance Report (APR) for _2005_ (Insert FFY)**Overview of the Annual Performance Report Development: See Indicator # 1****Monitoring Priority: Effective General Supervision Part C / General Supervision****Indicator 14:** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2005	100 percent of all required reports will be accurate and submitted on or before due dates.

Actual Target Data for 2005: 100 percent of all required reports were submitted on time (SPP, Follow-up SPP OSEP Response and 618 Tables) and with accurate information.**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for (2005 FFY):**

Improvement Activity number 1 (Propose creation of new NDICC executive committee, to facilitate recommendations and approvals needed before next regularly scheduled NDICC meeting or to recommend scheduling of special NDICC meetings.) was proposed and changes to the NDICC by-laws drafted, but the NDICC has not yet voted on the change.

Improvement Activity number 2 (Develop contract for data management support) was completed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for (2005 FFY)

The timeline for Improvement Activity number 1 will be extended to July 1, 2007 to allow new NDICC members time to review the proposed changes.